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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number 10217.01 **DECLARATION FOR UTILITY OR** First Named Inventor **DESIGN** James Moshier COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date Declaration Declaration October 7, 2003 Submitted OR Submitted after Initial Art Unit With Initial Filing (surcharge (37 CFR 1.16 (e)) Filing Examiner Name required) I hereby declare that: Each inventor's residence, mailing address, and citizenship are as stated below next to their name. I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Method and Apparatus for Forming Multi-Sided Containers (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International and was amended on (MM/DD/YYYY) Application Number (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. **Prior Foreign Application** Foreign Filing Date **Priority** Certified Copy Attached? Country Number(s) (MM/DD/YYYY) Not Claimed Yes

[Page 1 of 2] 4 This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

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5260 N. Palm Av										
City Fresno				State	CA				ZIP	93704
Country		Telephon				Fax				
USA		(559)	435-550	00		(559	9) 4	35-15	500	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.										
NAME OF SOLE OR FIRST IN	VENTOR:	i		etition l	se t	een filed f	ar this	เหลา	ned inventor	,
Given Name			<u> </u>	Dutter 1	12.3	Family Na		, or rolling	100 1117011101	
(first and middle [if any])	Y					or Surnan	1R	M - L 4		
	James							Moshi		
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Signature	The state of the s								10-0	27-03
Residence: City	State			Coun	гу	 .		Citizer	rship	
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DECLARATION — Utility or Design Pat nt Applicati n

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Telephone USA (559) 435-5								
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST IN	VENTOR:			etition	has i	pean filed for thi	s unsian	ned inventor
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NAME OF SECOND INVENTO	R:				A	petition has bee	n filed fo	or this unsigned inventor
Given Name (first and middle [if any])	Dan					Family Name or Sumame	Djo	okovic
Inventor's Signature	blo	-					K	The Atober 2003
Residence: City Indianapolis	State Indian	a		Cour USA	•		Citizer	nship USA
Mailing Address 3540 Hollow Run Circle # 322								
City Indianapolis	State Indian	a			ZIP 462	214-5081	Countr USA	y
X Additional inventors or a legal re	ed era evitatineaero	ing named or	the 1 a	upplam	ental s	heet(s) PTO/SB/02A	or 02 R z	strached hereto.

PTO/SB/02A (08-03)

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[ADDITIONAL INVENTOR(S)]

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DECLARATION		Supplemen	tol Sheet		Page	<u> </u>
Name of Additional Joint Inventor, if any:		A pati	lion has been fi	led for this u	neigned inve	infor
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Melling Address						
City Readley	State	CA	Zip 936	554	Country	USA
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Given Name (first and middle (if any)		Family Name or Sumeme				
Inventor's Signature		Date				
Residence: Cily	State		Country			Citizenship
Mailing Address		· · · · · · · · · · · · · · · · · · ·				
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City	State		Zip		Country	
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	Application Number		
POWER OF ATTORNEY	Filing Date	October	7. 2003

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Multi-Sided Containers	
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I Practitioner(s) named below:	
Nome Registration Number	\neg
Mark D. Miller 32277	
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as mylour attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Pau Trademark Office connected therewith.	ent and
Please recognize or change the correspondence address for the above-identified application to: X The above-mentioned Customer Number:	
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The address associated with Customer Number:	
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X Firm or Individual Name Mark. D. Miller Address Kimble, MacMichael & Upton	
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Mark D. Miller Address Kimble, MacMichael & Upton	
Signature of Applicant under 37 CFR 3.73(b) is anclosed. (Farm PTO/SB/95) Simbol	
Firm or Individual Name	
Mark D. Miller Mark D. Miller Mark D. Miller Mark D. Miller MacMichael & Upton	

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS	Application Number		
	Filing Date	October 7, 2003	İ
	First Named Inventor	James Moshier	1
	Title	Method and Apparatus for F	brming
	Art Unit	Multi-Sided Containers	1
INDICATION FORM	Examiner Name		1
	Attorney Docket Number	10217.01	7

I hereby appoint						
X Practitioners at Custome OR	Number:					
Practitioner(s) named be	low: 25265					
	Name		Registration	Number		
Mark D. Mil	ler	32277				
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Please recognize or change the	correspondence address for the above Customer Number:	identified application		-	:	
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
	SIGNATURE of Applican	t or Assignee of Rec	ord			
Name Dan Diokov	ic //					
Signature	then KIL					
Dale October 6	2003		elephone	(559)	638-8484	
NOTE: Signatures of all the inventor forms if more than one signature is n	n or easignmen of record of the entire interest applied, see below.	or their representative(s) (ere required. S	Submit multip	ala .	
*Total of 3	forms are submitted.					

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Application Number	imation driess it displays a valid OMB control number.	
Filing Date	October 7, 2003	1
First Named Inventor	James Moshier	1
Title	Method and Apparatus for E	brming
Art Unit	Multi-Sided Containers	1 7
Examiner Name		1
Attorney Docket Number	10217.01	†

I hereby appoint:						
X Practitioners at Customer Number. OR						
Practitioner(s) named bel	OW: 25265	OFFICE				
	Name		Registration Number			
Mark D. Miller 32277						
as my/our attorney(s) or agent(s Trademark Office connected the		above. and to t	transact all business in the United States Patent and			
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Telephone	(559) 435-5500	Fax	(559) 435–1500			
1 am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.						
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record						
Name <u>Da</u> n Nouria	n					
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Date October 7	, 2003		Telephone (559) 638-8484			
NOTE: Signatures of all the inventor forms if more than one signature is r	s or assignees of record of the entire interest equired, see below*.	or their represent	tative(s) are required. Submit multiple			
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